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DATE: July 25, 2005

Bingham McCutchen LLP
1900 University Avenue
East Palo Alto, CA
94303-2223

	NAME	FAX	PHONE
TO:	M/S: AF Commissioner for Patents	571-273-8300	

650.849.4400
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FROM:	Maritza D. Kidd maritza.kidd@bingham.com	(650) 849-4800	(650) 849-4481
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PAGES: (INCLUDING THIS COVER PAGE): 23

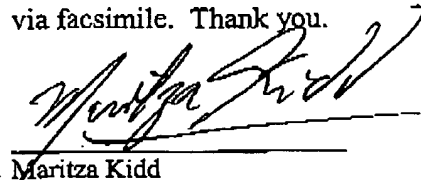
RE: Amendment and Response Appl S/N: 10/633,820

Boston
Hartford
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MESSAGE:

PLEASE DELIVER TO EXAMINER **John Lacyk**
Re: US Application Serial No. 10/633,820

I hereby certify that an Amendment and Response to Final Office Action (9 pages); RCE (1 page), Information Disclosure Statement (3 pages), Form PTO/SB/08A (2 pages), Terminal Disclaimer (3 pages); Change of correspondence address (1 page) and transmittal with authorization to charge fees (3 pages) are being submitted to the United States Patent and Trademark Office on the date above. Please confirm receipt via facsimile. Thank you.



Maritza Kidd

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The information in this transmittal (including attachments, if any) is privileged and confidential and is intended only for the recipient(s) listed above. If you are neither the intended recipient(s) nor a person responsible for the delivery of this transmittal to the intended recipient(s), you are hereby notified that any unauthorized reading, distribution, copying or disclosure of this transmittal is prohibited. If you have received this transmittal in error, please notify us immediately at (same telephone number as in first paragraph - will duplicate) and return the transmittal to the sender. Thank you.

Timekeeper No:	23258	Client/Matter No:		DATE/TIME STAMP
Client/Matter Name:	7039313001			
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PA/52165753.1

Dkt No. 20245800-7039313001
(04-004 US04)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Brian D. Zelickson, et al.

Serial No.: 10/633,820

Filed: August 4, 2003

For: DEVICE AND METHOD FOR
TREATMENT OF GASTROESOPHAGEAL
REFLUX DISEASE

Group Art Unit: 3736

Confirmation No.: 7509

Examiner: John Lacyk

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Mail Stop: AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

1. Documents enclosed:

Transmitted herewith in response to the Office Action mailed March 23, 2005, for the above-identified application, are the following:

- ☒ Amendment and Response to Office Action (9 pages);
- ☒ RCE (1 page);
- ☒ Information Disclosure Statement (3 pages);
- ☒ Form PTO/SB/08A (2 pages);

CERTIFICATE OF FACSIMILE TRANSMISSION
(37 C.F.R. §1.6 (d))I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted via fax on the date shown below to U.S. Patent and Trademark's fax number at: (571) 273-8300 addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.July 25, 2005
Date of facsimile transmissionMaritza Kidd
Name of Person transmitting Paper

Signature of Person transmitting Paper

PA/52162386.1

Dkt No. 20245800-7039313001
(04-004 US04)

- ☒ Terminal Disclaimer (3 pages);
- ☒ Change of correspondence address (1 page); and
- ☒ Transmittal with certificate of facsimile transmission and with Authorization to charge fees (3 pages);

2. Request for EXTENSION of Time:

The proceedings herein are for a patent application and the provisions of 37 CFR § 1.136 apply.

- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input checked="" type="checkbox"/> one month	\$60.00	\$120.00
<input type="checkbox"/> two months	\$225.00	\$450.00
<input type="checkbox"/> three months	\$510.00	\$1,020.00
<input type="checkbox"/> four months	\$795.00	\$1,590.00
<input type="checkbox"/> five months	\$1,080.00	\$2,160.00
Fee		\$120.00

- ☒ If any extension fee is required, please consider this a petition therefore.

3. RCE, Additional CLAIMS and TERMINAL DISCLAIMER Fees:

Total amount of Additional Claims fee Previously Paid						(\$780.00)
Total Claims	26	-	20	=	6	x \$50.00 = \$300.00
Independent Claims	3	-	3	=	0	x \$200.00 = \$0.00
Multiple Dependent Claims	\$360	(if applicable)			<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS						\$0.00
RCE fee required under 37 CFR 1.17(e)						\$790.00
Terminal Disclaimer						\$130.00
Fee for Extension of time						\$120.00
TOTAL FEES DUE HEREWITH						\$1,040.00

4. Method of Payment of fee:

- ☒ Charge Bingham McCutchen's Deposit Account No. **50-2518** in the amount of **\$1,040.00.**

Dkt No. 20245800-7039313001
(04-004 US04)

☒ The Commissioner is authorized to charge Bingham McCutchen's Deposit Account No. 50-2518 for any fees required by the filing of these papers that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account No. 50-2518.

Respectfully submitted,
BINGHAM McCUTCHEN LLP

Dated: July 25, 2005

By: 

David T. Burse
Reg. No. 37,104

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